



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Georg K. Shibata, et al.

Serial No: 09/335,363

Filed: June 17, 1999

For: SAMPLE LOADING AND HANDLING INTERFACE TO  
MULTIPLE CHEMISTRY ANALYZERS

Art Unit: 1743

Examiner: P. Bex

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:  
Commissioner for Patents  
Washington D.C. 20231, on  
June 18, 2002

Date of Deposit

Wei-Ning Yang, Reg. No. 38,690

Name

Signature

Date

Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
- ☐ A certified copy of [COUNTRY] Patent Application No. [APPL'N#] filed [FILING DATE] from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☒ Petition for One-month Extension of Time is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	[#CLMS AFTER AMDT]	-	[HIGHEST # PD] **	0	LG=\$18 SM=\$9	[\$FEE]	\$ 0
INDEPENDENT CLAIMS FEE	[# IND CLMS AFTER AMDT]	-	[HIGHEST # IND CLMS PD] ***	0	LG=\$84 SM=\$42	[\$FEE]	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140		\$ [FEE]
TOTAL							\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.
- ☒ A check in the amount of \$ 110.00 to cover the extension fee is enclosed. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

Date: June 18, 2002

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